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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)
WITH POWER OF ATTORNEY**

☐ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 4949

First Named Inventor Karl-Heinz HAASE

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Device for Determining Strains on Fiber Composite Components

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 10/29/2004 as United States Application Number or PCT International

Application Number PCT/EP2004/012310 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
103 50 974.7	Fed. Rep. of Germany	10/30/2003	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent
Number

Parent Filing Date
(MM/DD/YYYY)

Parent Patent Number
(if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number

021553

Place Customer
Number Bar Code
Label here

021553

Direct all correspondence to: ☒ Customer Number
or Bar Code Label

021553

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

Karl-Heinz

Family Name
or Surname

HAASE

(first and middle [if any])

Inventor's
Signature

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☐ A petition has been filed for this unsigned inventor

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Family Name
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HECKER

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☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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PAGE 2 OF 3

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DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>	
Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
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Mailing Address Im Tiefen See 45					
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Mailing Address c/o Hottinger Baldwin Messtechnik GmbH					
Mailing Address Im Tiefen See 45					
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Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name		Family Name or Surname			
Inventor's Signature			Date		
Residence: City		State	Country		Citizenship
Mailing Address					
Mailing Address					
City		State	ZIP	Country	

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DECLARATION		ADDITIONAL INVENTOR(S) Complemental Sheet Page 1 of 1	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> Applicant is the designated inventor	
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> Applicant is the designated inventor	
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Mailing Address			
Mailing Address			
City		ZIP	Country

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